

OFFICIAL GAZETTE

GOVERNMENT OF GOA

EXTRAORDINARY

GOVERNMENT OF GOA

Public Health Department

Notification

13/94-92-I/PHD

Government is pleased to introduce the Goa Mediclaim Scheme for the residents of Goa in order to provide them special medical facilities in recognised hospitals outside and within the State of Goa in super specialities for which facilities are not available in the State Government Hospitals.

The Scheme has come into force from 19-7-92 and applies to the entire State of Goa. The following class of employees and their family members are excluded from the purview of the above scheme.

- i) State/Central Government employees.
- ii) Employees of Banks, State Government Undertakings, Public Sector Undertakings and other Institutions owned by the State/Central Government.

Eligibility:

- 1) All permanent residents of Goa figuring in the voters list and whose family income does not exceed Rs. 50,000/- per annum are eligible for medical relief under this Scheme.
- 2) For claiming medical relief under this Scheme they should produce a certificate from the concerned Head of Department of Goa Medical College Hospital and counter-signed by Dean, Goa Medical College or Directorate of Health Services where they are undergoing medical treatment certifying that the facilities for treatment are not available at Goa Medical College/Hospital.
- 3) The maximum medical relief that will be admissible under this scheme is Rs. 50,000/- of actual Hospital expenditure whichever is the least.

Kind of treatment covered: —

The following super specialities treatment is covered under the Scheme: —

- i) Neurological Disorders
- ii) Cardio-Thoracic Surgery
- iii) Kidney Transplantation
- iv) Plastic Surgery
- v) Radio therapy
- vi) Total replacements of Joints
- vii) Any other major diseases/illness for which treatment facilities as certified by Dean, Goa Medical College/Director, Directorate of Health Services, Goa are not available in the State Government Hospitals.

3) Medical/Surgical Expenses:

(a) Actual expenses necessarily incurred in a hospital in respect of:

1. Room, board and nursing expenses limited to Rs. 250/- per day.
2. I. C. U.
3. Surgeon's and Anaesthetist's fees.
4. Anaesthesia, blood, oxygen, operation theatre, surgical appliances.
5. Diagnostic materials and X-rays.
6. Medical practitioner's consultant's and Specialist's fees.
7. Medicines and Drugs.

4) How to apply:

- (a) The patient himself or any member of the family can apply for the medical assistance under the Scheme.
- (b) The application should be addressed to the Director, Directorate of Health Services (Mediclaim Cell) Campal, Panaji-Goa as per either Form 'C' or Form 'D' as the case may be.

- (c) The application should be accompanied by a certificate issued by the Mamlatdar as per Form 'B' and the Medical Certificate issued either by the Dean, Goa Medical College or Head of Department of Goa Medical College Hospital or Director of Health Services as per Form 'A'.

On receipt of application by Director of Health Services, Panaji, he will issue a letter to the concerned Hospitals (in Bombay or elsewhere) undertaking to bear the responsibility of meeting the expenditure on the medical treatment to the maximum extent of Rs. 50,000/- per illness in Form 'E'.

5) Settlement of Bills:

The bills for the entire admissible Hospital expenses will be submitted by the concerned Hospitals directly to the 'Director, Directorate of Health Services, Mediclaim Cell, Campal, Panaji-Goa and the Director of Health Services will settle the bills through Demand Draft by presenting the bills to the Director of Accounts, Panaji. Since the amount will be drawn by the Director of Health Services, suitable bill form for drawal of amount will be prescribed by the Director of Accounts in consultation with the Director of Health Services. Every bill in this matter will be signed by Director of Health Services. So also the pre-receipted bill of the Hospital in original. Director of Health Services should check the bills before submitting to the Director of Accounts in respect of Medical and Surgical expenses as per the decision and also ensure the fulfilment of conditions laid down in the Scheme.

This Scheme is beyond the ambit of the Medical Attendant Rules which for the present regulate the Medical claims of Government employees.

6) Facilities at Bombay:

Patients admitted in Hospitals or undergoing treatment under this scheme in hospitals in Bombay can avail accommodation facilities at Goa Bhavan, Juhu, Bombay as per availability of accommodation there.

7) Whom to contact:

(i) Director
Directorate of Health Services
Panaji-Goa
Telephone: Office: 45561
Res. 45837

(ii) Dean
Goa Medical College
Bambolim-Goa
Telephone: Office: 46288
Res. 47623

This issue with the concurrence of Finance (Exp.) Department vide their U. O. No. 950 dated 10-2-93.

By order and in the name of the Governor of Goa.

D. N. Accarade, Under Secretary (Health):

Panaji, 15th April, 1993.

SPECIFICATION OF FORMS

Office of the
Goa Medical College
Bambolim - Goa

No.

FORM

MEDICAL CERTIFICATE

This is to certify that the patient is suffering from facilities for treatment of which are not available in this State. The patient, is, therefore, advised to seek such facility outside this State.

Countersigned

Signature of Head of Deptt./
/Dean, Goa Medical College/
/Director of Health Services

Office Seal

Office of the Mamlatdar of
Taluka
Date

No.

FORM - B

INCOME CERTIFICATE

This is to certify that is a permanent resident of Goa having his residence at (as indicated below) House No.... ward ..., village ..., taluka ... and that his income and that of the members of the family from all sources does not exceed Rs. 50,000/- per annum.

It is further certified that is a voter and his/her name is registered at 'Serial No. of Voters' List maintained in this Office.

It is certified that parent/guardian of the minor is a voter and his name is registered at Sr. No. of Voters' List maintained in this Office.

In case of minor

Signature
Mamlatdar
Office Seal:

FORM - C

(Application for self treatment
under the Mediclaim Scheme)

Name
Address
Dated:

To,

Directorate of Health Services
Mediclaim Cell,
Campal - Panaji - Goa

Sub:- Treatment under the Mediclaim Scheme

Sir,

I have to proceed to for Mediclaim treatment at (place)

as required under the Scheme, I am submitting herewith the following certificates:

- (i) Certificate from the Dean, Goa Medical College/ /Director of Health Services that facilities for my treatment are not available in this State:
- (ii) Certificate from the Mamlatdar of that total income of my family does not exceed Rs. 50,000/- per annum and I am registered in the Voters' List.

I shall be obliged if a letter recommending me for medical treatment at is kindly issued to me immediately for admission in the hospital.

Yours faithfully,

Encl: As above

FORM - D

(Application for treatment under the Mediclaim to be submitted on behalf of the patient when the patient is a minor)

Name
Address
Dated:

To,

The Director
Directorate of Health Services
Mediclaim Cell
Campal - Panaji - Goa

Sub:- Treatment under the Mediclaim Scheme

Sir,

My is to be taken to
(relation) (name of the patient) (place)
for medical treatment at as required under
the Scheme. (name of hospital)

The following certificates are submitted:

- 1) Certificate from the Dean, Goa Medical College/
Director of Health Services that facilities for his/
her treatment are not available in this State.
- 2) Certificate from the Mamlatdar
(taluka)

that the total income of my/his family does not
exceed Rs. 50,000/- per annum and that he/she is
registered in the Voters' List (not applicable if
minor)

I shall be obliged if a letter recommending him/her for
treatment at
(name of hospital) (place)

is kindly issued to me immediately for admission in the
hospital.

(Yours faithfully)

(
Signature

FORM - E

(Format of undertaking to be given to the hospital/patient
in respect of treatment and payment)

Office of the Directorate of
Health Services,
Mediclaim Cell
Campal - Panaji - Goa
Dated:

To,

.....
.....
.....

Dear Sir,

This is to certify that Mr./Ms. is eligible for
benefits under Mediclaim Scheme of Government of Goa.

The reimbursement per illness under the Mediclaim will be
limited to Rs. 50,000/- or actual Hospital expenses whichever
is the least in respect of the following:

- 1) Room, board and nursing expenses including sur-
charge, if any, limited to Rs. 250/- per day.
- 2) I. C. U.
- 3) Surgeon's and anaesthetist's fees
- 4) Anaesthesia, blood, oxygen, operation theatre, surgi-
cal appliances.
- 5) Diagnostic materials and X-rays.
- 6) Medical Practitioner's, Consultant's and Specialist's
fees.
- 7) Medicines and Drugs.

Mr/Ms. has been advised

We enclose a xerox copy of the Certificate dated
issued by Dean, Goa Medical College/Director of Health Ser-
vices Goa and undertake to reimburse you upto Rs. 50,000/-
on receipt of your bills.

Kindly admit him/her and render necessary treatment and
send us the claim form and your bills, duly signed by the
patient, for settlement.

Thanking you in anticipation,

Yours faithfully,

(
Director of Health Services

Copy forwarded to:

- 1) Shri/Smt/Kum.
- 2) Under Secretary (Health), Public Health Department
Secretariat, Panaji-Goa, for information.
- 3)